<b>Application</b>	or Docket	Numbe
Application	OI TOCKE!	MOUNDS

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

9139

-							_					- 2 - 1
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE (			OTHER THAN			
TOTAL CLAIMS			7.49				.	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			2 4 mi	√ minus 20= *		l		X\$ 9=		OR	X\$18=	77
INDEPENDENT CLAIMS			S m	ninus 3 = * O				X43=			X86=	
MULTIPLE DEPENDENT CLAIM PRESENT					$\neg$		7,40=	-	OR			
							+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	845	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL		
		CLAIMS	1	HIGHE		1	ľ			7 1		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
<b>AME</b>	Independent	<u> </u>	Minus	***		]=		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM			+145=		OR	+290=	
							L					
								TOTAL		OR	TOTAL	
				-			Α	DDIT. FEE			ADDIT. FEE	
		(Column 1)		_(Colum	ın 2)	(Column 3)						
		CLAIMS		HIGHE		1	Г		ADDI	1 1		4001
8		REMAINING	1	NUMB	ER	PRESENT			ADDI-			ADDI-
5		AFTER		PREVIO		EXTRA		RATE	TIONAL		RATE	TIONAL
ũ		AMENDMENT	l	PAID F	OR		L		FEE		<u> </u>	FEE
AMENDMENT B	Total	*	Minus	**		= :		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF ML	Minus	***	CL AINA	=		X43=	•	OR	X86=	
	FIRST PRESE	NIAHON OF MC	CTIPLE DEF	ENDENT	CLAIM	السلطني		+145=		OR	+290=	
							L	TOTAL		L	TOTAL	•
		•	•			۴.	Δ1	DDIT, FEE		OR ,	DDIT. FEE	
		(Column 1)		(Colum		(Column 3)			•		·.	•
	<b>\</b>	CLAIMS	•	HIGHE					ADDI-			ADDI-
ပ		REMAINING .		NUMBI		PRESENT	•	RATE	TIONAL		DATE	TIONAL
Z		AFTER AMENDMENT		PREVIOU PAID F		EXTRA	ł	HAIE		·	RATE	
闄		AMENDMENT		PADE	Un		-		FEE	-		FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
¥.	Independent	*	Minus	***		=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									•	~`` <b>!</b>	-	
+145= OR +290=									·			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE								•	OR .	TOTAL		
[]	ure riighest Nu!	mber Previously Par	RIPOR IN IHIS	S SPACE IS I	ess man	1 20, emer "20."	· AD	DIT. FEE		On A	DOIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	• .	•	•	•				: * *		٠.	•	